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THE
HEALTH
OF
HYDE

1949



BOROUGH OF HYDE.

Annual Report
of the
Medical officer of Health
for the year
1949

F. W. CAMPBELL BROWN, M.D.,
Ch.B., D.P.H.

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BOROUGH OF HYDE HEALTH COMMITTEE.

1949

Chairman—Councillor Mrs. W. Barton

His Worship the Mayor (Councillor Mrs. A. W. Bayes, J.P.)

Alderman V. Firth, J.P.

Councillor B. Armitage

Alderman W. Barton

Councillor Mrs. F. Goddard

Councillor H. A. Taylor

Councillor J. Walker

Councillor A. J. Oldham

Staff of the Borough of Hyde Health Department.

Medical Officer of Health : F. W. C. BROWN, M.D. D.P.H. (Part-time.)

Chief Sanitary Inspector : T. Nicholson.

Additional Sanitary Inspectors : H. Pike, R.R.T. Mortimer.

Chief Clerk : P. T. Beard (Part-time.)

Other Clerical Staff : N. Buckley, Miss B. Higginbottom (Part-time),
Mrs. Grist (Part-time) (Resigned 15/10/49), Miss J. Loseby
(Part-time) (Commenced 24/10/49,)

Staff of Hyde Divisional Health and School Medical Services of the Cheshire County Council.

Divisional Medical Officer & School Medical Officer :

F. W. C. BROWN, M.D., D.P.H. (Part-time.)

Assistant County Medical Officer : J. G. Bennett, M.D.

Dental Surgeon : Miss Lisbeth Kippen, L.D.S., D.P.D.

Senior Health Visitor & School Nurse : Miss I. Burrill.

Other Health Visitors & School Nurses : Miss F. Lonsdale, Mrs. L.
Smith (Resigned 30/10/49), Miss D. Wood, Miss A. Gough
(Commenced 1/7/49.)

Home Nurses—Hyde : Miss G. McClean, Miss H. Sutton, Mrs. A. Barber
(Part-time), Mrs. G. Pugh (Part-time.)

Mottram & Broadbottom : Mrs. I. M. Huyton.

Hollingworth & Tintwistle : Mrs. G. E. Hewitt.

Midwives : Mrs. A. D. Hall, Miss K. A. Johnson, Miss L. Kitchen, Miss
L. Sambrook, Miss M. P. Schofield.

Chief Clerk : P. T. Beard (Part-time.)

Other Clerical Staff : Miss A. MacKenzie, Miss B. Higginbottom (Part-
time), Miss J. Loseby (Part-time), Mrs. S. Booth (Dental
Clerk/Attendant.)

Ambulance Supervisor : Mr. F. Mellor.

***Clinical Specialists— Pædriatrician :** J. D. Allan, M.D., F.R.C.P.

Orthopædic Surgeon : C. M. Dransfield, F.R.C.S.

Ophthalmic Surgeon : W. E. Lawson, M.B., Ch.B., D.P.H.

Gynæcologist : T. Fitzgerald, F.R.C.S., F.R.C.O.G.

Hon. Advisor in Epidemiology : F. W. C. Brown, M.D., D.P.H.

* Staff of Regional Hospital Board allocated to specific duties within the
Hyde Division.

INTRODUCTION.

The duties of a Medical Officer of Health, as prescribed by the Sanitary Officers Regulations 1935, and as contained in a Memorandum on the subject dated 1935, relate primarily to safeguarding the health of the area for which he acts by such means as are at his disposal. He must report from time to time to his employing Authorities upon matters relating to which they may consider appropriate action should be taken, and he must also submit annually a report to his employing Authorities and to the Minister of Health.

The National Health Service Act, 1946, has modified the duties which applied to a Medical Officer of Health appointed prior to the 5th July, 1948 by a Borough such as Hyde to the extent that, whilst in his annual report he should still deal in general with matters within his responsibility regarding public health and preventive medicine, he should also include a review of the working of the arrangements made by other administrative bodies whose responsibilities cover the area in which part of his services have been transferred to them for specific purposes. Hence the inclusion of the subject matter contained in Sections IV, V and VI.

Thus, the Medical Officer of this Borough, in addition to the duties assigned to him, has now become the chief liaison official between the Local Authority and the Local Health Authority in the field of the domiciliary and environmental aspects of the new service.

With the assumption that all disease processes are preventable, liaison between the curative services, as allocated to the Hospital Boards and the General Practitioners on the one hand, and the services administered by the elected representatives of the people on the other hand, is far from complete. The Medical Officer, for instance, has no access to information relating to the amount or type of sickness (apart from certain infections) prevailing within his district. He is informed as to the number and causes of deaths, but in his position he could be of greater service if the incidence of and recoveries from all diseases were also in his possession. The new service has failed to a great extent in this respect by setting up watertight compartments in administration, and particularly in stressing the curative side of medicine at the expense of the preventive aspect. Complete liaison could be possible by so extending his duties, and in addition would open up a wide field for research into the causes of all disease. With his training and experience in administration it would seem obvious that the local Medical Officer could thus be more usefully employed than upon some of the duties at present assigned to him.

Two years have elapsed since the new service was introduced, and many more must pass before it will be acclaimed as satisfactory by experienced members of the medical profession. Frustration is almost universal among them, and even a spirit of defeatism prevails in some sections. The practitioners of scientific medicine have long replaced the men who practiced the art of healing by magic and faith in bygone times; that they have chosen to follow this career has been due more to an innate desire to relieve suffering and to an interest in this science, rather than to amass wealth. In the new service, in which regimentation is tending to replace freedom of choice and voluntary effort, it would seem that this spirit is likely to fade (just as the will to nurse as a calling has already done), and that the machine in which each member now forms but a small component, will eventually be comparable to any other modern mechanical device which produces quantity rather than quality.

To judge this new service without an entirely new order of men to operate it would be more politic than just, but whether the substitution of untried methods for those previously in operation will reveal an advance, comparable with the demise of the ancient art of healing by magic at the hands of rational methods, must await a generation for the verdict.

F. W. C. BROWN.

SECTION 1.

GENERAL STATISTICS.

Area (in acres)	4,195
Population (Census, 1931, revised)	32,075
Population (Registrar-General's Estimate for 1949)	31,450
Number of Inhabited Houses as at 31st December, 1949	10,543

EXTRACTS FROM VITAL STATISTICS OF THE YEAR. BIRTHS REGISTERED.

Legitimate Males	217	Females	215	Total	432
Illegitimate Males	14	Females	15	Total	29
Birth Rate : Hyde 14.7 England & Wales 16.7					461

STILLBIRTHS.

Legitimate Males	7	Females	3	Total	10
Illegitimate Males	—	Females	—	Total	—
					10

LOCATION OF BIRTHS AND STILLBIRTHS NOTIFIED.

Month	At Home (by C.C. Midwives).	Aspland Maternity Home.	Ashton.	St. Mary's Hosp'l.	Stepping Hill Hosp'l.	Other.	Total.
January	13	15	3	2	—	1	34
February	5	24	5	3	1	—	38
March... ..	14	28	8	2	4	—	56
April	7	11	1	5	—	1	25
May	9	27	4	3	—	1	44
June	8	21	7	6	—	—	42
July	13	15	5	5	—	3	41
August... ..	9	23	5	3	—	5	45
September... ..	8	16	10	1	—	1	36
October	12	18	8	5	—	1	44
November	13	11	7	4	—	1	36
December	12	18	7	4	—	—	41
Totals	123	227	70	43	5	14	482

DEATHS REGISTERED.

Males 253 Females 224 Total 477.
Death Rate : Hyde 15.2. England & Wales 11.7.

TABLE 1.—REGISTRAR GENERAL'S RETURN.

Cause of Death.	Males.	Females.
Influenza	6	6
Acute Poliomyelitis... ..	—	—
Acute Encephalitis	—	1
Cerebro-Spinal Fever	—	—
Tuberculosis of Respiratory System	9	2
Tuberculosis (other forms)	2	—
Measles... ..	—	—
Whooping Cough	—	1
Syphilis	2	2
Cancer—Malignant Disease	33	32
Diabetes	—	1
Cerebral Hæmorrhage, etc.	24	37
Heart Disease	75	71
Other Circulatory Diseases	16	6
Bronchitis	18	17
Pneumonia (all forms)	10	7
Other Respiratory Diseases	4	1
Peptic Ulcer	2	1
Diarrhœa, etc. (under 2 years of age)	—	2
Appendicitis	3	—
Other Digestive Diseases	6	2
Acute and Chronic Nephritis	8	3
Maternal Causes	—	1
Congenital Debility, Premature Birth. Malforma- tions, etc.	4	7
Suicide	1	3
Violence	3	3
Other defined Diseases	27	18
	—	—
All Causes	253	224

DEATHS OF INFANTS UNDER ONE YEAR OF AGE.

Number of Deaths.		Deaths per 1,000 Births.	
Legitimate	15	Hyde	34.7
Illegitimate... ..	1	Eng. & Wales ...	32.0

TABLE 2. INFANTILE DEATHS, 1949.

Causes of Death Among Infants	AGE											
	1st Four Weeks				1st Three Months			The Four Quarters				Total
	0—1	2	3	4	*0	1	2	*0—1	2	3	4	*0—1
a { Congenital Malformations Prematurity Icterus Neonatorum Atelectasis Marasmus Injury at Birth	...	...	...	...	...	...	...	...	...	...	...	...
	4	...	...	...	4	...	...	4	...	...	...	4
	...	...	...	...	...	...	...	...	...	...	...	...
	2	1	...	...	3	...	...	3	...	...	...	3
	...	...	...	...	...	...	...	...	...	...	...	...
b { Pneumonia Bronchitis Influenza Measles	2	...	1	...	3	...	...	3	...	...	...	3
	1	...	...	1	2	...	...	2	...	1	...	3
	...	...	...	...	...	...	...	...	...	...	...	...
	...	...	...	...	...	...	...	...	...	...	...	...
	...	...	...	...	...	...	...	...	...	...	...	...
c { Encephalitis Convulsions Meningitis Gastro enteritis	...	...	...	...	...	...	...	...	...	...	...	...
	...	...	...	...	...	...	...	...	...	...	...	...
	...	...	...	...	...	...	...	...	...	1	...	1
	...	...	...	...	...	...	1	1	1	...	...	2
	...	...	...	...	...	...	...	...	...	...	...	...
d Other Causes	...	...	...	...	...	...	...	...	...	...	...	...
All Causes	9	1	1	1	12	1	1	13	1	2	...	16

* This column includes all deaths in preceding columns.

SECTION II.

INFECTIOUS DISEASES.

No serious type of Infectious Disease was prevalent during the year, although a mild form of Scarlet Fever and Measles accounted for the majority of the 561 cases compulsorily notified to the Health Department.

The 139 cases of Scarlet Fever is in all probability a low estimate of the actual number of cases suffering from what should now be termed Streptococcal Throat Infection. The rash, hitherto the main objective feature of Scarlet Fever, now-a-days is of less intensity and often very evanescent, thereby rendering the true nature of the patient's complaint of doubtful origin. Consequently in many cases the family practitioner is not even consulted by the parent, while in others the rash, if any, has faded or entirely disappeared prior to his examination.

Approximately 50% of the cases were admitted to hospital, and in most of these the necessity arose through difficult domestic conditions where facilities for nursing in the homes did not allow of adequate safeguard against spread of infection, rather than that the patient required hospital treatment.

Where the living conditions are sufficiently commodious for a separate bedroom to be available for the patient it should not be necessary for all but a small percentage of cases of this condition to be admitted to hospital. Furthermore it is unlikely that hospital isolation is full proof against the spread of infection, as the condition can occur without the evidence of any rash among other members of the family, playmates etc., who continue to be at large and thereby spread infection in this way.

No cases of Diphtheria have occurred for the third successive year. The downward trend of this disease and the effects of immunisation can readily be studied by reference to Table 4. The relationship, if any, between this form of protection and Anterior Poliomyelitis must receive the careful attention of those whose duty it is to control preventable diseases. That it is receiving attention by every means known to medical science should be realised. The cause of Poliomyelitis and its mode of spread have yet to be discovered ; that immunisation causes Poliomyelitis is not the case, but whether immunisation tends to render the child more liable to the more severe effects of this disease is not yet proved. No case of this disease has occurred in the Borough for two years, and neither of the two cases which did occur during the year 1947 could be ascribed as having followed immunisation. Until proof is established one way or the other, and so long as this disease remains absent from the area, it would be injudicious for the public to neglect the facilities available in the eradication of Diphtheria, and of Whooping Cough.

Tuberculosis, being a preventable disease, should continue to receive the highest priority in the minds of the legislators in social medicine if its eradication is to come about to any marked degree. Only within recent years have new preventative and curative means of control become available in the hands of those well versed in this scourge. While the outlook has to some degree improved, it is to better and more adequate housing conditions that activities should be focussed. Every badly housed case of this disease, and every badly overcrowded household, whether containing among its occupants a known case or not, certainly demand all the assistance possible to obtain the best hygienic living conditions which can be provided.

The number of known cases of Tuberculosis in the Borough is 206 and although not increasing, the contrary cannot yet be a boast to be indulged in. A decline in this number should be the goal to which all should aim.

TABLE 3.
CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1949.

Notifiable Diseases	Under 1 year	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 to X	At all ages	Cases admitted to Hospital	Total Deaths
Scarlet Fever ...	—	7	6	20	28	68	7	1	2	—	—	—	139	69	—
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia ...	1	—	—	—	—	1	—	—	1	3	2	2	8	—	—
Erysipelas ...	—	—	—	—	—	—	—	—	2	1	1	—	6	—	—
Acute Poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia ...	—	—	—	—	—	—	—	—	1	—	—	—	1	1	—
Cerebro Spinal Meningitis ...	1	—	—	—	—	—	—	—	—	—	—	—	1	1	—
Measles ...	14	97	58	50	73	42	1	—	2	—	—	—	337	5	—
Whooping Cough ...	3	7	6	5	8	2	1	—	—	—	—	—	32	—	1
Ophthalmia Neonatorum	1	—	—	—	—	—	—	—	—	—	—	—	1	1	—
Tuberculosis : Pulmonary	—	1	—	—	—	—	1	1	13	9	2	2	29	—	—
Non-Pulmonary	—	1	—	—	—	1	2	—	—	2	1	—	7	—	—
	20	113	70	75	109	114	12	2	21	12	8	5	561	77	1

TABLE 4.

DIPHTHERIA IMMUNISATION.

Number inoculated each year since inception.

AGE	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	Total inoculations
0— ...	—	—	—	7	19	37	40	32	54	30	36	99	84	Under Five years 1,261.
1— ...	5	44	75	41	117	111	149	168	202	208	201	186	241	
2— ...	7	49	36	26	99	58	27	43	48	28	19	18	35	
3— ...	14	57	40	15	65	65	36	35	18	31	11	6	25	
4— ...	15	76	52	19	72	66	23	20	9	18	11	19	19	
5— ...	21	74	54	17	117	78	19	10	12	11	17	19	19	5-14 years 3,001.
6— ...	15	63	26	19	110	40	12	10	4	2	30	16	12	
7— ...	13	60	33	9	93	41	5	9	—	2	26	11	4	
8— ...	9	62	29	27	98	29	2	15	1	5	23	18	—	
9— ...	13	64	35	15	71	41	1	9	2	1	21	14	2	
10— ...	4	53	24	6	72	28	3	9	1	2	22	10	—	15 yrs. and over 1,816.
11— ...	7	28	10	8	64	38	1	3	2	1	9	7	—	
12— ...	10	44	24	12	48	42	5	6	2	—	10	15	—	
13— ...	6	22	21	8	43	52	1	—	—	—	14	8	—	
14— ...	1	3	1	1	2	2	—	—	—	—	2	2	—	
15 & over	1	—	—	1	1	—	—	—	—	—	—	—	—	
Total														
Each Year	141	699	460	231	1091	728	324	369	355	339	452	448	441	Grand Totals 1937-49. 6,078.
Re-inforcing Injection	—	—	—	—	—	—	—	—	—	30	1494	307	240	
Cases of														
Diphtheria	146	79	20	16	8	7	3	6(1)	3(1)	1	—	—	—	
Deaths from														
Diphtheria	9	8	1	2	—	—	—	—	—	—	—	—	—	

Note :—Figures shown thus () indicate cases among immunised children included in the total.

SECTION III.

SANITARY CIRCUMSTANCES IN THE AREA.

Water Supply.

Domestic water is supplied by Manchester Corporation (Woodhead Supply) and by Ashton Corporation. Both are moderately soft waters and treated for purity at the source, but the former water frequently has a peaty discolouration. Five service reservoirs are used, none of which is covered. Two of them are of old stone pitched construction, one (Arnold Hill) being structurally defective and surrounded by a fringe of urban development. In 1945, following a series of unsatisfactory samples, investigation revealed that sewage was leaking into this reservoir from the sewer in Arnold Avenue, which was in consequence relaid. Since then there has been considerable improvement but samples have not always been entirely satisfactory on examination. Sampling is done regularly from all the service reservoirs and submitted to bacteriological examination, and because some have been unsatisfactory, supplies have been re-chlorinated. Even this precaution has not always been effective in the case of Arnold Hill, indicating that intermittent contamination in this reservoir is taking place. The Council has now been recommended that this reservoir be emptied and examined, and that, if necessary, it should no longer be used as a service reservoir.

A local supply for manufacturing purposes is filtered, but is unfit for domestic use.

The total daily consumption is 1.02 million gallons, or 32.4 gallons per head, of which 153 million gallons or 17.6 gallons per head is the domestic consumption.

The water is supplied through approximately 65 miles of mains, many of which are old, and, since little maintenance was carried out during the war, in need of cleaning and renewal.

Corporation water supplied 10,423 dwellings in the Borough with a piped constant supply generally of good quality. Wells and springs are the source of supply to 120 farms and dwellings on the outskirts of the town, most of which became part of the Borough in 1936, but these sources cannot be considered altogether satisfactory. It is proposed, however, if financially practicable, to install equipment for supplying many of these with the town's water.

Bacteriological examination of 17 samples were taken from Corporation supplies during the year, all but 3 being satisfactory. Samples were also taken from 22 wells and springs, of which 11 were satisfactory and 11 unsatisfactory.

Water supplied to the Public Swimming Baths is also regularly examined. During the year 4 samples of this water were examined, 3 of which were satisfactory. In June, 1949, the "break-point" chlorination method was introduced. This resulted in the water being clearer in appearance, bluish in colour, and of exceptional bacterial purity. 'Eye-smart' has also been eliminated.

Closet Accommodation.

The number of premises fitted with closets of the various types at the end of 1949 was approximately :—

W.C.'s with cistern flush.	W.C.'s hand flushed and waste water.	Privies.	Pails.	Chemical Closets.
5,264	... 5,098	... 12	... 111	8

To encourage the conversion of slop-closets to cistern-flushed W.C.'s, the Council provided for a grant of £5 to be paid for each conversion in approved cases. Payment of these grants commenced on April 1st, 1948, and 50 grants have been provided for in each financial year since, for all of which application has been approved.

Receptacles in use.

The number affecting the work of this department is made up as follows :—

Ashbins.	Ashpits.	Pail Closets.	Privy Middens.	Cesspools.
10,705	... Nil	... 117	... 12	... 32

Sanitary Inspection of the Area.

The following tabular statement has been prepared in accordance with Article 27 of the Sanitary Officers (Outside London) Regulations, 1935, and contains information as to :—

- (a) The number and nature of inspections made during the year.
- (b) The number of notices served during the year, distinguishing statutory from informal notices.
- (c) The results of the service of such notices.

TABLE 5. STATEMENT OF SANITARY INSPECTIONS FOR THE YEAR ENDING DECEMBER 31st, 1949.

Inspections		No. of Notices Served		Results of Services of Notices		Notices Outstanding
Nature	Number	Informal	Statutory	Complied with by Owner or Occupier	Complied with by Corporation in default	
Recorded Housing Inspections	4	622	16	463	2	157
Other Houses under P.H. or H.A.	1226	...	...	...	...	...
Revisits	1845	...	...	...	...	...
Courts, Yards and Passages	240	...	...	...	...	...
Pail Closets	7	5	...	5	...	38
Ashbins and Ashpits	654	292	37	250	4	...
Premises re keeping of Animals	35	...	...	...	...	...
Slaughterhouses	79	...	...	...	...	15
Other Food Premises	374	29	...	14	...	1
Farms and Dairies	230	4	...	3	...	...
Stables	15	...	...	...	...	...
Piggeries	29	...	...	...	...	...
Observations and Visits re Smoke	237	...	...	...	...	...
Common Lodging Houses	8	...	...	...	...	4
Other Premises under P.H.A.	57	7	...	3	...	...
Factories with Mechanical Power	79	...	...	...	...	...
Factories without Mechanical Power	42	...	...	...	...	...
Outworkers' Premises	11	...	...	...	...	...
Bakehouses	148	2	...	2	...	...
Milk—Tubercle Bacilli	166	...	...	...	...	...
—Sediment Test	73	...	...	...	...	...
—Fat Test	63	...	...	...	...	...
—Pasteurised	46	...	...	...	...	...
—Sterilised	4	...	...	...	...	...
Water—Bacteriological Samples	43	...	...	...	...	...
Ice Cream Samples, Methylene Blue	31	...	...	...	...	...
—Chemical	6	...	...	...	...	...
Infectious Diseases	208	...	...	...	...	2
Rodent Control	181	3	...	1	...	...
Verminous Premises	90	...	...	...	...	...
Offensive Trades	83	...	...	...	...	...
Public Conveniences	146	...	...	...	...	1
Refuse Removal	338	20	...	19	...	...
Refuse Disposal	237	...	...	...	...	...
Interviews	901	...	...	...	...	...
Miscellaneous	1007	...	...	...	...	...
Shops	21	3	...	3	...	...
Salvage	298	...	...	...	...	...
Committees, etc	75	...	...	...	...	...
Diseases of Animals Act	53	...	...	...	...	...
Overcrowding	93	...	...	...	...	...
Slop-Closets Conversions	171	...	...	...	...	...
Dangerous Buildings Survey	54	...	...	...	...	...
Milk Distributors	89	...	...	...	...	...
Houses let in Lodgings	5	...	...	...	...	...
Movable Dwellings	50	...	...	...	...	...
TOTALS	9,852	987	53	763	6	218

TABLE 6.
DEFECTS REMEDIED DURING 1949.

Dwelling-houses.

Defective ceiling construction	...	...	...	...	...	...	...	10
„ plaster	...	...	...	...	...	...	...	142
„ floors	...	...	...	...	...	...	...	38
„ kitchen ranges, fireplaces and flues	...	...	...	...	...	...	...	50
„ washboilers	...	...	...	...	...	...	...	2
„ windows and cords	...	...	...	...	...	...	...	96
„ doors	...	...	...	...	...	...	...	39
„ staircases	...	...	...	...	...	...	...	6
„ damp-proof courses	...	...	...	...	...	...	...	3
„ sinks	...	...	...	...	...	...	...	12
„ sink waste pipes	...	...	...	...	...	...	...	11
„ skirting boards	...	...	...	...	...	...	...	9
„ roofs	...	...	...	...	...	...	...	106
„ pointing and brickwork of walls	...	...	...	...	...	...	...	83
„ chimneys	...	...	...	...	...	...	...	33
„ yard paving or walls	...	...	...	...	...	...	...	22
„ rainwater pipes	...	...	...	...	...	...	...	95
„ eavesgutters	...	...	...	...	...	...	...	169
„ dustbins and sanitary pails...	...	...	...	...	...	...	...	264
„ drains reconstructed or repaired	...	...	...	...	...	...	...	105
Defective w.c. apparatus	...	...	...	...	...	...	...	25
„ buildings	...	...	...	...	...	...	...	21
„ water supply	...	...	...	...	...	...	...	7
Choked w.c.'s	...	...	...	...	...	...	...	18
External wall repairs	...	...	...	...	...	...	...	4
Accumulations of refuse removed	...	...	...	...	...	...	...	32
Miscellaneous	...	...	...	...	...	...	...	30
Shops Act—Miscellaneous	...	...	...	...	...	...	...	5

Factories.

Miscellaneous Nuisances	...	...	...	...	...	...	...	16
Limewashing required at bakehouses	...	...	...	...	...	...	...	3

Food Premises.

Washing facilities	...	...	...	...	...	...	...	24
Floors and walls	...	...	...	...	...	...	...	10
Limewashing	...	...	...	...	...	...	...	3

Total	...	...	...	...	...	...	...	<u>1493</u>
-------	-----	-----	-----	-----	-----	-----	-----	-------------

HOUSING STATISTICS.

Number of New Houses Erected During the Year :

- | | |
|--------------------------------------|----|
| 1. By the Local Authority | 30 |
| 2. By other bodies or persons | 11 |

Inspection of Dwelling-houses During the Year :

- | | |
|---|------|
| 1. (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) | 1230 |
| (b) Number of inspections made for the purpose ... | 1230 |
| 2. (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932 | 4 |
| (b) Number of inspections made for the purpose ... | 4 |
| 3. Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation | 3 |
| 4. Number of dwelling-houses (exclusive of those referred to under the preceeding sub-head) found not to be in all respects reasonably fit for human habitation | 2 |

Remedy of Defects During the Year Without Service of Formal Notices :

- | | |
|--|---|
| Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers | 1 |
|--|---|

Action Under Statutory Powers During the Year :

- | | |
|--|-----|
| (a) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 :— | |
| (1) Number of dwelling-houses in respect of which Notices were served requiring repairs | 2 |
| (2) Number of dwelling-houses which were rendered fit after service of formal notices:— | |
| (a) By Owners | — |
| (b) By Local Authority in default of owners ... | 2 |
| (b) Proceedings under Public Health Acts :— | |
| (1) Number of houses in respect of which Notices were served | 15 |
| (2) Number of houses in which defects were remedied — | |
| (a) By Owners | 11 |
| (b) By Local Authority | Nil |

(c) Proceedings under Section 11 of the Housing Act of 1936 :—

(1) Number of houses in respect of which Demolition Orders were made ... Nil

(2) Number of houses demolished in pursuance of Demolition Orders ... 2

(d) Proceedings under Section 12 of the Housing Act, 1936 :—

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made ... Nil

(2) Number of separate tenements or under ground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit ... Nil

Housing Act, 1936 (Part IV.)—Overcrowding :

(a) (I) Number of dwellings overcrowded at end of year ... 63

(II) Number of families dwelling therein ... 78

(III) Number of persons dwelling therein ... 463

(b) Number of new cases of overcrowding reported during the year ... 11

(c) (I) Number of cases of overcrowding relieved during the year ... 19

(II) Number of persons concerned in such cases ... 136

Defective Houses.

	1934-41	1942	1943	1944	1945	1946	1947	1948	1949	Total
Houses demolished or finally closed	377	—	9	6	—	3	2	1	2	400
Houses or parts of houses closed or vacated	53	—	—	—	1	—	—	—	11	65

Number of Persons Displaced from Houses to be Demolished or Closed.

From		Families	Persons		Total
			M.	F.	
Clearance Areas	... 1949 ...	—	—	—	—
Individual Houses	.. 1949 ...	7	19	18	37
Total since inception of programme in 1934		512	811	872	1683

Eradication of Bed Bugs.

	Found infested.			Disinfested.		
Council Houses	...	...	8	...	...	8
Other Houses	...	...	13	...	...	13
			—			—
Totals	...	...	21	...	...	21
			—			—

Disinfection.

The following are the particulars of disinfection, etc., carried out during the year :—

Dwellings—for Infectious Diseases	...	...	...	...	...	66
Number of beds destroyed (at owners' request)	...	...	...	...	...	61
Number of mattresses destroyed (at owners' request)	...	...	...	...	...	27
Number of pillows destroyed (at owners' request)	...	...	...	...	...	23
Bundles of clothing destroyed (at owners' request)	...	...	...	...	...	7

RODENT CONTROL.

In November, 1943, the Borough Council became responsible for working the Rats and Mice (Destruction) Act, 1919, as agents for the Cheshire County Council, the Senior Sanitary Inspector being appointed Rodent Officer.

In April, 1948, the County Council delegated their powers to the Borough Council, and the Ministry of Agriculture and Fisheries approved the Borough Council's proposals for Rodent Control. Two full-time operatives are engaged in dealing with infestations and surveying premises for evidence of infestation.

During 1949 two maintenance treatments of the sewers for the destruction of rats were carried out following a test-baiting. Maintenance treatments have been carried out at six monthly intervals since the first major treatment in 1944.

The number of surface infestations reported during the year was 181, none of which could be classed as a major infestation. Of these 172 (58 Rats, 114 Mice) were treated by our own operatives, the remainder being treated by the occupiers. Those treated by our own operatives include 95 in private dwellings (43 Rats, 52 Mice,) 57 in business premises (10 Rats, 47 Mice) and 20 in Corporation premises (5 Rats, 15 Mice.)

In addition, 2234 visits were paid to premises in search of infestations, including 202 to business premises, 1946 to private dwellings, and 86 to Corporation premises.

FACTORIES ACT, 1937 & 1948.

1.—**INSPECTIONS** for purposes of provisions as to health (including inspections made by Sanitary Inspectors)

Premises (1)	M/c line No. (2)	Number on Register (3)	Number of			M/c line No. (7)
			Inspections (4)	Written Notices (5)	Occupiers Prosecuted (6)	
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	1	66	109	6	—	1
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority...	2	213	160	6	—	2
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	3	—	—	—	—	3
TOTAL ...		279	269	12	—	

2.—CASES IN WHICH **DEFECTS** WERE FOUND

Particulars (1)	M/c line No, (2)	Number of cases in which defects were found				Number of cases in which proceedings were instituted (7)	M/c line No. (8)
		Found (3)	Remedied (4)	to H.M. Insp'tor (5)	Referred by H.M. Insp'tor (6)		
Want of cleanliness (S.1)	4	3	1	—	—	—	4
Overcrowding (S.2) ...	5	—	—	—	—	—	5
Unreasonable temperature (S. 3)	6	—	—	—	—	—	6
Inadequate ventilation (S.4)	7	—	—	—	—	—	7
Ineffective drainage of floors (S.6)	8	—	—	—	—	—	8
Sanitary Conveniences (S.7)—							
(a) Insufficient ...	9	2	—	—	2	—	9
(b) Unsuitable or defective	10	4	3	—	1	—	10
(c) Not separate for sexes... ..	11	2	1	—	1	—	11
Other offences against the Act (not including offences relating to Outwork)	12	1	1	—	—	—	12
TOTAL ...		12	6	—	4	—	

3.—**OUTWORKERS.** 42 outworkers were registered, of whom 23 make wearing apparel.
No offences against this Section were reported.

INSPECTION AND SUPERVISION OF FOOD.

Milk Supply.

On October 1st, the Food and Drugs (Milk and Dairies) Act, 1944 came into operation, together with the Milk and Dairies Regulations, 1949, the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949, and the Milk (Special Designation) (Raw Milk) Regulations, 1949. The effect of the new legislation was that the supervision of milk production passed from Local Authorities to the Ministry of Agriculture and Fisheries. In Hyde, however, the majority of dairy farmers are producer-retailers, and we are in a position to sample their milk and keep a check on their results. Another effect is that the one pasteurising plant in the Borough, instead of, as formerly, being licensed by the Corporation, is now licensed by the County Council. The result is that the County Council is responsible for the supervision of the pasteurising plant, while the Borough Council is responsible for the supervision of the dairy premises, which seems a quite unnecessary waste of man-power.

The register of cow-keepers at the end of September contained the names of 49 premises, but at 8 of these premises no milk is being produced for sale. The number of persons on the register of milk purveyors was 56, of whom 11 retail milk in the Borough from surrounding districts.

Seven of the cow-keepers are licenced by the County Council to produce either Tuberculin Tested or Accredited Milk.

Under the new Regulations, 97 Milk Distributors have been registered, and the following licences issued :— 95 dealers' licences and 2 supplementary licences in respect of Sterilised Milk, 7 dealers' licences and 3 supplementary licences in respect of Pasturised Milk and 12 dealers' licences and 2 supplementary licences for Tuberculin Tested Milk.

Tests by Inoculation of Guinea Pigs for Tubercle Bacilli.

Of the 167 samples of Milk submitted to examination, 12, or 7.19 per cent were found to contain Tubercle Bacilli. In all cases where positive results were obtained the appropriate County Medical Officer of Health was notified, the offending animal traced, if possible, and destroyed in accordance with the Tuberculosis Order, 1925.

The figures for the past 15 years are shown below :—

Year	No. of samples examined	No. of samples found to contain Tubercle Bacilli	Percentage containing Tubercle Bacilli
1935	63	7	11.11
1936	61	9	14.7
1937	51	10	19.68
1938	70	8	11.42
1939	72	5	6.94
1940	66	3	6.54
1941	60	3	5.60
1942	73	6	8.22
1943	81	3	3.70
1944	162	6	3.70
1945	163	15	9.20
1946	152	7	4.60
1947	64	2	3.12
1948	152	5	3.29
1949	167	12	7.19

ICE CREAM.

There are on the register 6 manufacturers and 46 vendors of Ice Cream.

With the enactment of the Ice Cream (Heat Treatment) Regulations, 1947, several of the smaller manufacturers changed over to the "cold mix" method of manufacture, so that two manufacturers use "hot mix" and four use "cold mix."

During the year 31 samples were tested by the Methylene Blue test and also for the presence of B. Coli, 16 proving satisfactory and 15 unsatisfactory. Of these, 6 unsatisfactory and 10 satisfactory samples were of Ice Cream manufactured outside the Borough.

Meat Inspection.

No regular inspection of carcasses is carried out in the Borough—that consumed being inspected prior to entry at No. 2 Slaughter House in Stockport by inspectors from Hyde, Marple, Denton and Audenshaw. The following particulars indicate the quantity of unsound meat condemned by the Hyde sanitary inspectors.

Disease or Condition.				Tons	cwts.	grs.	lbs.
Bovine Tuberculosis	...	...	...	13	5	0	7
Distomatosis...	...	...	...	1	0	3	3
Abscesses	...	...	...		4	2	20
Cavernous Angioma	...	...	...		7	1	25
Cirrhosis	...	...	...		2	0	4
Hydatid Cysts	...	...	...		2	0	0
Mastitis	...	...	...		2	3	10
Actinomycosis	...	...	...		2	2	20
Inflammation...	...	...	...		1	2	14½
Decomposition	...	...	...		3	2	14
Strongyli Rufescens	...	...	...		1	2	2
Unsound—							
Canned	...	...	...		2	1	16½
Not Canned	...	...	...		6	2	6
Miscellaneous	...	...	...		9	1	14
				16	12	2	16
Other Foods	...	...	...	1	2	0	6½
Total...				17	14	2	22½

CARCASES INSPECTED AND CONDEMNED.

	Cattle ex- cluding Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
Number inspected	531	557	281	3231	11
ALL DISEASES EXCEPT TUBERCULOSIS :					
Whole carcasses condemned ...	...	...	2	3	1
Carcasses of which some part or organ was condemned ...	174	284	...	247	3
Percentage of number inspec- ted affected with disease other than Tuberculosis ...	32.77	50.99	0.71	7.74	36.36
TUBERCULOSIS ONLY :					
Whole carcasses condemned	4	26	...	...	...
Carcasses of which some part or organ was condemned	123	302	...	...	1
Percentage of number inspec- ted affected with Tuber- culosis	23.92	58.89	...	...	9.09

Diseases of Animals Acts.

46 licences reporting movement of animals were received during the year and the necessary visits of inspection made.

Shops (Hours of Closing) Acts.

Routine inspections were carried out during the year, but no offences were recorded.

SECTION IV.

GENERAL CURATIVE SERVICES AVAILABLE FOR THE BOROUGH.

General Practitioners.

Thirteen Practitioners reside within the Borough and adequately supply the needs of the population. Judged by the waiting time necessary at some consulting rooms it would appear that a more even distribution of patients would be to the advantage of the people — other aspects being even.

In addition to the service given by the practitioners resident within the Borough it is not unusual to find that many patients living in the periphery of the town receive medical attention from practitioners in neighbouring districts.

Hospitals.

Under the provisions of the National Health Service Act all hospitals within the Borough were transferred to the Manchester Regional Hospital Board on the 5th July, 1948. Whilst administrative control passed from the Hyde Corporation on that date, owing to difficulties in medical staffing arrangements your Medical Officer of Health continued to be responsible for the treatment of patients until the 30th September, 1949, when Medical Staff attached to the Ashton, Hyde and Glossop Group of hospitals assumed this responsibility. Your Medical Officer of Health from that date retained his connection with the Isolation Section of Hyde Hospital in a capacity as Honorary Advisor in Epidemiology to the Management Committee of the hospitals within the Group.

In this way liason between the Local Health Authorities and the Hospitals admitting cases of an infectious nature is possible, and indeed is an essential link in the Service.

Bed accommodation is available within the Borough for the following types of patient :—

General Diseases (Medical)	36 beds.
Infectious	34 „
Tuberculosis	33 „
Maternity	11 „

It must however be borne in mind that the occupancy of these beds is not confined to Hyde residents, but it is the general policy of the hospital authorities to allocate where possible any available beds to patients living in a district in which the hospital is situated.

Provided that the downward trend of epidemic disease continues in the light of recent experience the Hyde Hospital should remain an asset to the local residents. Its scope has been widened, and, through the foresight of its previous administrators in the acquisition of additional land surrounding its present lay-out, the site is admirably adapted for purposes of extension so as to include facilities for treatment at present not possible.

The section of this hospital originally used for Smallpox cases has deteriorated in structure to such a degree as to render it of doubtful value for any use for treating sick persons on modern lines. Only as a site value for emergency use, as and when occasion arises, is this section worthy of retention by the present owners.

Hospitals located outside the Borough provide the majority of bed accommodation used by the local residents, and although accurate figures as to the number of admissions to the actual hospitals used are not readily available, a general estimate obtained from the ambulance service would indicate that, whereas in the case of two neighbouring towns the majority of patients are provided for in Ashton Hospitals, this is not the case to such a degree in the case of Hyde residents.

The actual number of Hyde patients transported by ambulances during 1949 for hospital attention was as follows :—

Ashton Group.	Manchester Group.	Stockport Group.
4106	1644	684

With the further development of the hospitals' service it would seem reasonable to anticipate a still higher percentage of Hyde patients provided for within the area covered by the Ashton Group. The specialised services available in this group at the moment would however require expansion to a greater degree in order to be comparable to the resources available in the larger centres. When this is possible, and with an improved through public transport service, greater benefit to the patients and their visiting relatives would ensue, and, incidentally, the present heavy demands upon the Ambulance Service would be reduced by the shorter mileage involved. The situation of the hospitals in Ashton involves residents of Hyde in difficulties which could be greatly reduced if the present Hyde-Ashton bus service were extended to a point within the proximity of the hospitals which are located some distance beyond the present bus terminus.

Infectious cases continue to be admitted to Hyde hospital, and, provided no epidemic occurs simultaneously throughout the catchment area of this hospital, the present provision of beds allotted for such cases should be adequate.

BACTERIOLOGICAL AND CHEMICAL ANALYSIS SERVICE.

The Public Health Laboratory at Monsall Hospital undertakes all examinations hitherto sent to the Manchester University Public Health Laboratory, this change having been instituted as a part of the National Health Service.

The following specimens have been examined and reported thereon.

Nose and Throat Specimens	...	...	...	...	...	24
Smear Test	...	...	...	...	...	1
Milk for T.B.	...	...	...	...	...	167
Milk for Methylene Blue and Phosphatase Test...	...	...	...	...	...	46
Milk for Turbidity Test	...	...	...	...	...	4
Ice Cream	...	...	...	...	...	31
Water for Bacteriological Tests	...	...	...	...	...	43
Total	...	...	...	...	...	316

PHYSIOTHERAPY CLINIC

Facilities, which for many years have been available to local residents for the treatment of conditions requiring specialised supervision, and provided by the Hyde Orthopædic After-Care Voluntary Committee, have after prolonged negotiation with the Regional Hospital Board been retained within the Borough.

This clinic hitherto provided a valuable service, but with the introduction of the national service it soon became evident that more provision would be required to accommodate a greater number of patients. This has proved to be the case, necessitating an increase in personnel and of equipment.

A visiting surgeon attached to the Ashton Group of hospitals attends once per week, and two full time physiotherapists and one clerk are now employed to carry out treatment, etc., daily.

Re-organisation of the accommodation at the Parsonage Street premises has been possible to allow the installation of additional apparatus, without seriously interfering with other work for which the building is used.

The additional equipment was provided from funds belonging to the After-Care Committee who continue to administer the day to day requirements and for which payments are made to the Committee by the Manchester Hospital Board. By this means local interest has thereby been maintained without the financial embarrassment which would undoubtedly have been felt following the introduction of the National Health Service.

Your Medical Officer acts as liaison officer on the After-Care Committee in an honorary capacity.

The number of attendances for treatment during the year was 9909 which is approximately double that carried out prior to the institution of the new service.

The number of patients examined by the surgeon was 923, compared with 343 during 1948.

These numbers amply justify the continuance of the Physiotherapy Centre within easy reach of the patients' homes, and in addition affords an immense saving of travelling time by patients to and from the hospitals, as well as relieving the hospital of additional numbers in the already overcrowded out-patient departments.

SECTION V.

This Section deals with services transferred for administrative purposes on the 5th July, 1948, to the Local Health Authority, i.e. the Cheshire County Council, and includes the services available in Longdendale and Tintwistle, and of which the day to day administration is under the control of the Hyde Divisional Health Committee.

CARE OF MOTHERS AND YOUNG CHILDREN

GENERAL CLINICS

The Clinic at Parsonage Street continued to function as in previous years - a Medical Officer and two Health Visitors being present upon two sessions per week. The distribution and sale of infant foods and other nourishments are undertaken by a clerk on the general office staff.

The ladies' voluntary committee has continued to give valued service in the provision of tea, etc., to the patients, the weighing of infants and the keeping of records.

The Clinic at Bayley Hall continued to function upon a two session per week basis throughout the year. A Medical Officer and a Health Visitor were present upon one session each week and a Health visitor has attended during the remaining sessions.

The distribution of infant foods and other nourishments is undertaken by a clerk on the general staff.

The ladies' voluntary committee has provided additional assistance in the provision of teas to patients, and in connection with the weighing of infants and the keeping of records.

The Clinic at Hollingworth was held in St. Mary's Church School and was held on the 1st and 3rd Thursday each month throughout the year. The staff consists of a Doctor engaged upon a part-time sessional basis, and one Health Visitor.

The sale and distribution of infant foods, the provision of tea and clerical assistance is provided by a ladies' voluntary committee.

The Tintwistle Clinic held in Christ Church Sunday School was opened on the 13th January of the year and was held on the 2nd and 4th Thursday each month. The staff consists of a Doctor engaged upon a sessional basis, and one health visitor.

The sale and distribution of infant foods, the provision of tea and clerical assistance is provided by a ladies' voluntary committee.

(Care of Mothers and Young Children continued)

The Broadbottom Clinic, opened on the 20th July in the Methodist Church School, and sessions were held on the 1st and 3rd Wednesday of each month.

The staff consists of a Doctor paid upon sessional basis, and one Health Visitor.

The sale and distribution of infant foods, provision of teas and clerical assistance is provided by a ladies' voluntary committee.

Facilities for Immunisation against Diphtheria and Whooping Cough have continued throughout the year at all the above premises.

The extension of clinic facilities within the Division, especially in the periphery, has been fully justified as the attendances stated in the following figures reveal.

	No. of sessions held.	New Cases.	Total Attendances.	Seen by Doctor.
Hyde (Parsonage St.)	103	278	7595	1223
Hyde (Bayley Hall)	98	160	4186	350
Hollingworth	24	64	1165	231
Tintwistle	24	50	673	214
Broadbottom	11	37	385	80

ANTE-NATAL CLINIC

This was held once per week in the Parsonage Street premises. A Medical Officer attended upon each Monday and was assisted by one Health Visitor and County Midwives.

Facilities are now available for Ante-Natal and Post-Natal exercises, U. V. R. on the premises, and for Dental treatment on the School Clinic premises.

	No. of sessions held.	New Cases.	Total Attendances.	Seen by Doctor.
Parsonage St.				
(ante-natal)	48	89	350	350
(post-natal)		12	26	26
Dental				
(ante-natal)	20	31	80	68
(post-natal)		52	156	125
Dentures Supplied		29	36	36

SPECIALIST CLINICS

A Pædiatrician attended upon two sessions per month at the Hyde Clinics and to whom cases were referred by General Practitioners and Medical Officers on the staff.

An Orthopædic Surgeon attends at Parsonage Street Clinic once per week and to whom cases may be referred by General Practitioners and Medical Officers.

Ophthalmic cases are referred to the Eye Clinic held at the School Clinic in the Reform Club each week.

	No. of sessions held.		New Cases.		Total Attendances.		Seen by Doctor.
Pædiatric	21	...	26	...	45	...	45
Orthopædic	48	...	78	...	400	...	181
Ultra Violet Ray	96	...	77	...	731	...	39
Ophthalmic	2	...	4	...	6	...	6
Dental	20	...	90	...	166	...	160

WELFARE FOODS

	Proprietary Milk Foods.		Other Nourishments.
	Packets.	Total Sales.	Total Sales.
Hyde (Parsonage St.)	7067	£766-11- 5	£127-12- 3
Hyde (Bayley Hall)	4024	£434-11-10	£110- 2- 8
Other Clinics	(Supplied by Voluntary Committees — amounts not available.)		

The following issues were made at the Hyde Clinics or Food Office under the National Milk and Vitamins Scheme:—

Dried Milk :	5,899 pound packets at the cheap rate and 154 free of cost.
Vitamins:	25,532 bottles Orange Juice.
	6,477 bottles Cod Liver Oil.
	1,551 packets A. & D. Tablets.

FACTORY NURSERIES

Two Industrial Day Nurseries in the Division have received supervisory attention by the Divisional Medical Officer, and the children have been medically inspected by the Assistant County School Medical Officer.

VACCINATION AND IMMUNISATION

The population of the Division under 15 years of age is 7,066.
The number of preventive treatments carried out were as under :-

	Clinics.	Drs.	Surgery.	Patients' homes.	
(a) Diphtheria	638	...	134	...	4
(b) Whooping Cough	100	...	47	...	10
(c) Combined (a) & (b)	—	...	10	...	9
(d) Primary Vaccination	—	...	43	...	12
(e) Re-Vaccination	—	...	16	...	1

AMBULANCE TRANSPORT

The figures reveal an increase of 533 cases conveyed, compared with the year 1948. As cases from the Denton area of Lancashire ceased to be the responsibility of Cheshire on the 1st February, 1949, the increase of cases from the areas of Cheshire is much greater than appears from the figures. It is of interest to record that for the year 1940 the number of cases conveyed by the service was 2,310, compared with 15,454 for 1949.

Difficulty has been experienced in maintaining the vehicles in a roadworthy condition owing to their age—one over 16 years of age having covered 300,000 miles—at a time when ever increasing demands are required of the service.

The only sitting case car was replaced in September by a Standard "Vanguard" which has so far proved satisfactory for the purpose.

The total distance covered was 83,436 miles in 6,585 journeys, giving an average mileage per patient for all the vehicles of 5.4 miles. The average cost of the service approximately was 11/- per patient, or 2/6 per head of the population served.

Vehicles in use :—4 Ambulances for Accident and General use.
1 ,, ,, Infectious Diseases.
1 Sitting Case Car.

Staff :—	1 Supervisor	3 Attendants
	1 Driver Mechanic	1 Telephonist/Attendant
	9 Drivers	1 Driver (part-time)

NURSING SERVICES

Two full-time and two part-time Domiciliary Nurses serve the Hyde area. The two full-time Nurses are accomodated at 17, Henry Street, Hyde, this property having been purchased by the County Council from the Hyde District Nursing Association as from 5th July, 1948.

No major repairs have been required, and, apart from some interior decoration and renewals of furniture now due, the living conditions are satisfactory.

The property, 11, Shaw Hall Avenue, having been purchased by the County Council during the year was converted into flats for the use by a Health Visitor and by a Midwife. Furnishings were purchased for one of these tenants, as furnished accommodation, the other renting the remaining portion on unfurnished terms.

Internal decorations are contemplated during 1950.

Two Domiciliary Nurses, residing in their own homes, cover the requirements of the Longdendale and Tintwistle areas. In the case of the latter, arrangements have been instituted for the provision of motor transport owing to the distances to be covered and the scattered nature of the district.

The number of cases attended to by the District Nurses of the Division are as under—

	Cases		Total Visits
Hyde	421	...	9,173
Mottram and Broadbottom	216	...	2,729
Hollingworth and Tintwistle	108	...	2,583

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Time has not permitted so far to enable this section of the work to be fully developed. Much ground work in relation to the actual number of Tuberculosis cases has been covered, and 217 visits have been paid by Health Visitors to the houses since April.

The number of cases on the Register at 31/12/49 was—

	Males				Females				Total
	Pulm.		Non-pulm.		Pulm.		Non-pulm.		
Hyde	74	...	20	...	73	...	39	...	206
Longdendale	10	...	6	...	7	...	9	...	32
Tintwistle	—	...	—	...	—	...	3	...	3
	84	...	26	...	80	...	51	...	241

(Prevention of illness, Care and After-care continued)

Deaths.

	Males				Females				Total
	Pulm.	Non-pulm.	Pulm.	Non-pulm.	Pulm.	Non-pulm.	Pulm.	Non-pulm.	
0	—	...	—	...	—	...	—	...	—
1 — 4	—	...	—	...	—	...	—	...	—
5 —14	—	...	1	...	—	...	—	...	1
15—24	1	...	—	...	—	...	—	...	1
25—34	—	...	—	...	1	...	—	...	1
35—44	3	...	—	...	1	...	—	...	4
45—54	2	...	—	...	—	...	—	...	2
55—64	3	...	—	...	—	...	—	...	3
65 plus.	—	...	—	...	1	...	—	...	1
	9	...	1	...	3	...	—	...	13

CARE OF THE AGED

A problem exists in relation to the welfare of the aged in their homes. Many are assisted by the Hyde Borough Welfare Scheme for the Aged, Infirm and Lonely People, either in their homes or by admission to Pole Bank Hall Hostel for female cases of this type. This Scheme, sponsored through voluntary effort has for some years provided the type of assistance envisaged by the Ministry of Health Circular 11/50 dated the 23rd January, 1950. Applications for help in the nature of clothing, bedding, shoes, nourishments, etc., continue to increase as the economic state of the country intensifies the hardships encountered by the aged. But the economic state of the country has yet another bearing on the problem, e.g. the increasing difficulty encountered by voluntary effort in maintaining financial resources, sufficient enough to continue with the good work. Section 31 of the National Assistance Act, 1948, allows Local Authorities to contribute to the funds of voluntary organisations providing these amenities in the homes. The provision of Domestic Helps is not sufficient in itself and cannot always be met by a few hours help daily. The inadequate supply of Health Visitors, even for supervisory duties, can only touch the fringe of the problem. Therefore it is to those well meaning members of the local community who give their time voluntarily to this pressing need that every encouragement should be given.

(Care of the Aged continued)

It should be borne in mind also that many of the aged are border line hospital cases; others are definitely in need of hospital attention, but for whom no such provision can be found. For these, increased provision for domiciliary nursing attention is a necessity in addition to domiciliary welfare work until hospitals can somewhat relieve the position.

The Hyde Welfare for the Aged, Infirm and Lonely People Committee have granted help to 89 such people in their own homes during 1949, and to 698 since the organisation was founded on the 18th December, 1946. In addition the 34 beds in Pole Bank Hall have been kept fully occupied throughout the year.

DOMESTIC HELP

Number of Home Helps—

Full-time	3
Temporary/casual	8

Number of persons for whom Helps were provided—

	Whole-day		Part-day		Total
Confinements (At home or hospital)	11	...	13	...	24
Aged Persons	2	...	8	...	10
Other reasons (Sickness, etc.)	3	...	10	...	13
	16	...	31	...	47

Total time worked by the Helps during the year	3,741½ hours.
Average length of time spent on each case	79.6 hours.

SECTION VI.

THE HEALTH OF THE SCHOOL CHILD.

The following particulars relate to various aspects of the examination of the school children and give only those which are of a general character. The figures relate to children within the Borough only and exclude Longdendale and Tintwistle.

	Total.
The number of children on the registers on 31/12/49, Seniors, Juniors, Infants	4130
" " " " examined as age groups—Seniors 230, Juniors 349, Infants 423...	1002
" " " " examined as specials	42
" " " " re-inspected	595
" " " " of excellent nutrition	7.23%
" " " " normal or nearly normal.....	84.49%
" " " " badly nourished	8.28%
" " " " of those examined who required medical treatment	14.71%
" " " " of those examined who require further observation.....	27.64%
The number of children found to require spectacles.....	77
" " " " examined for spectacles (including re-examination	152
" " " " who obtained spectacles.....	126
" " " " who received operative treatment for Tonsils and Adenoids	80
" " " " who received Orthopædic treatment	118
" " " " who received U.V. Ray treatment	79
" " " " suspected as mentally retarded ...	4
" " " " mentally retarded and not attending any school.....	7
" " " " all types of handicapped cases at residential special schools	10
" " " " examined by the School Dentist in schools.....	4170
" " " " found to require treatment.....	1661
" " " " treated in clinic	1201
" " " " treated under a general anæsthetic	445
" " " " attendances at Dental Clinic.....	3445
" " " " examined by School Nurses for uncleanliness	7311
" " " " found to be verminous	8 8%
" " " " cases treated at the School Clinic	1030
" " " " attendances by the above cases	5072
" " " " examinations by Medical Officer in Clinic	540
" " " " re-examinations by " " " "	578
Visits to parents by School Nurses re children	348

